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UNITED STATES PATENT AND TRADEMARK OFFICE
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Bib Data Sheet

CONFIRMATION NO. 8925

SERIAL NUMBER 09/838,483	FILING DATE 04/19/2001 RULE	CLASS 333	GROUP ART UNIT 2817	ATTORNEY DOCKET NO. 283014-00018-1
APPLICANTS Louise C. Sengupta, Ellicott City, MD; Andrey Kozyrev, St. Petersburg, RUSSIAN FEDERATION;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/198,690 04/20/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY** ** 06/14/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR COUNTRY MD	SHEETS DRAWING 4	TOTAL CLAIMS 18
INDEPENDENT CLAIMS 1				
ADDRESS 27512				
TITLE Waveguide-finline tunable phase shifter				
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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** FOREIGN APPLICATIONS ***** <i>NONE</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/14/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY MD	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 1
ADDRESS Robert P. Lenart Eckert Seamans Cherin & Mellott, LLC 600 Grant Street, 44th Floor Pittsburgh, PA 15219					
TITLE Waveguide-finline tunable phase shifter					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		